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## APPLICANTS

Shih-Jen Liu, Taipei, TAIWAN;

Wei-Yu Lo, Taipei, TAIWAN;

## \*\* CONTINUING DATA \*\*\*\*\*

none

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

none

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TAIWAN	SHEETS DRAWING 0	TOTAL CLAIMS 35	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged	Examiner's Signature	Initials	

## ADDRESS

26161  
 FISH & RICHARDSON PC  
 225 FRANKLIN ST  
 BOSTON , MA  
 02110

## TITLE

Enhancing cell-based immunotherapy

FILING FEE  RECEIVED 654	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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